

HAWAII STATE ETHICS COMMISSION ORGANIZATION'S OR INDIVIDUAL'S EXPENDITURES AND CONTRIBUTIONS REPORT

FORM ORG

(To be filed by organizations, employing organizations and individuals other than registered lobbyists)

HAWAII STATE ETHICS COMMISSION THIS SPACE FOR OFFICE USE ONLY 1001 Bishop Street, ASB Tower Suite 970 S Honolulu, Hawaii 96813 SEC (P.O. Box 616, Honolulu, Hawaii 96809) T m Telephone: (808) 587-0460 Fax: (808) 587-0470 email: ethics@hawaiiethics.org web site: www.hawaii.gov/ethics For lobbying reporting period: 808.948.5498 Michael A. Gold Phone Contact person) January 1 - last day of February Hawaii Medical Service Association Organization [/] March 1 - April 30] May 1 - December 31 PO Box 860 Mailing address Year of Report 20 05 Honolulu, HI 96808-0860 PART I. TOTAL EXPENDITURES The total sum or value of all expenditures for the purpose of lobbying during the statement 8,500.00 period was: \$ **EXPENDITURES** Total Total Category Amount Category Amount 7. Entertainment 1. Preparation & distribution of lobbying materials 8. Food & beverages 2. Media advertising 9. Gifts 3. Telegraph, telephone and other forms of telecommunication 10. Loans 4. Postage 11. Other disbursements 5. Compensation paid to lobbyists 8,500.00 TOTAL EXPENDITURES Fees (other than to lobbyists) 8,500.00 **COMPENSATION PAID TO LOBBYISTS** List in this section the names of all lobbyists and compensation paid to the lobbyists during the statement period. Compensation paid Name 818 Keeaumoku Street, Honolulu, HI 96814 1,000.00 Stacy K. Evensen 7,500.00 818 Keeaumoku Street, Honolulu, HI 96814 Jennifer Diesman

EXPENDITURES OF \$25 OR MORE PER PERSON PER DAY

[\checkmark] This section is not applicable	for the purpose of lobbying of \$25 or more	e per person per day during the statement per	riod. Amount or value
AGGREGATE EXPENDITURES OF \$150 OR MORE PER PERSON			
List in this section all expenditures incurred for the purpose of lobbying in the total sum of \$150 or more per person during the statement period. [✓] This section is not applicable			
[] Expenditures incurred in the aggregate of \$150 or more per person were made for the following persons:			
Name & Address			Amount or value
PART II. CONTRIBUTIONS RECEIVED			
[✓] This section is not applicable	m of \$25 or more per person were receive		ment period. Amount or value
PART III. SUBJECT AREAS OF LOBBYING Legislative and/or administrative action in the following areas was supported or opposed during the statement period:			
[] Agriculture	[] Education	[✓] Human Services	[] Science, Technology & Economic Development
[] Communications & Public Utilities	[] Government Operation & Finance	[] Intergovernmental Relations, International Affairs	[] Tourism & Recreation
[✓] Consumer Protection & Commerce	[] Hawaiian Affairs	[] Labor & Employment	[] Transportation
[] Culture, Arts, Historic Preservation	[✔] Health	[] Planning, Land & Water Use Management	[] Other: (indicate below)
[] Ecology, Energy Environmental Protection	[] Housing	[] Public Safety & Corrections	
I hereby certify that the statements made above are correct and complete to the best of my knowledge			
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(Signature of authorized person)			(Date)

Name of authorized person (type or print) Michael A. Gold